

- Specific attention must be placed on ensuring the physical and psychological safety of women.
- Commissioners of new inpatient provision should seek to develop services in socially inclusive settings that reflect a positive vision of mental health.
- New acute care provision should be designed to maximise service and community connections.

The National Minimum Standards for Psychiatric Intensive Care Units and Low Secure Environments guidance identifies standards and good practice to provide users, clinicians, managers and commissioners with a dynamic framework for delivering high quality services in these areas. There is a clear recognition that the physical environment is one of the defining aspects of these service areas and the detailed design offered clearly stipulates the standards to be achieved.

2.3.12 Women's Mental Health : Into the Mainstream - Strategic Development of Mental Health Care for Women

Women's Mental Health: Into the Mainstream - Strategic Development of Mental Health Care for Women²³ is a consultation document taking views on the issues related to providing comprehensive, safe, and secure mental health services which are responsive to women's needs. The creation of a safe environment for women is a key theme, again emphasising that access to women-only ward and day facility areas should be available in all mental health units.

2.3.13 National Suicide Prevention Strategy for England

The National Suicide Prevention Strategy for England²⁴ is a wide ranging strategy document supporting the government's objective of reducing the death rate from suicide by at least 20% by 2010, as outlined in *Saving Lives: Our Healthier Nation*. Within this is the requirement to remove all likely ligature points from in-patient wards and to ensure a regular environmental audit takes place in all in-patient psychiatric wards to minimise the risk of hanging and strangulation.

2.3.14 Signposts for Success - In Commissioning and providing Health Services for People with Learning Disabilities

Good practice guidance identifies the need to develop services specifically for persons with Learning Disabilities which are separate from mainstream Mental Health Services, whilst maintaining close linkages with them.

Specific recommendations include:

- Requirements for close liaison with other services in particular Primary Care and other community services.
- Self-contained in patient facilities for persons with behavioural problems relating to their mental health that minimise the risk to other mental health patients within the facility.
- The provision of specialist community teams to support well trained confident staff so that the use of in-patient beds are restricted to a small number of people, with specific admission criteria and discharge planning.

2.4 Statutory, Professional and Advisory Issues

There are several statutory, professional and advisory reports that have a bearing on the project and support the case for the redevelopment of local services. These include the Disability Discrimination Act, the Human Rights Act, guidance issued by professional bodies and the views of voluntary bodies.

2.4.1 Disability Discrimination Act

The NHS Executive good practice guidance 'Doubly Disabled'²⁵, provides NHS managers and staff with guidance on the 1995 Disability Discrimination Act. The guidance identifies three key issues for the NHS:

- The need to change policies and practices that make it impossible or unnecessarily difficult for a disabled person to use the service.
- The provision of auxiliary aids or services where it will facilitate access to services for disabled people.
- From 2004 the physical barriers that restrict or prevent the access of disabled people to services will have to be removed, or the services provided by alternative means.

As an employer the Trust is also required to ensure employees and prospective employees are not discriminated against because they have a disability.

2.4.2 The Human Rights Directive and Act

The act adds little to the rights individuals currently enjoy, but may, through greater awareness, increase the exercising of those rights with a consequential increase in litigation where individuals believe their rights have been infringed. This, in turn, may result in the revised interpretation and application of individual rights through case law. Many of the areas that are expected to be challenged, rationing of healthcare, postcode prescribing, etc., have been addressed through recent policy statements and the NHS Plan. The net impact of the legislation may only be the strengthening of public policies that already exist.

2.4.3 Royal College of Psychiatrists

Not Only Bricks and Mortar²⁶

This reports focuses on the size, staffing, security, structure and siting of new acute in-patient units for Adult Mental Health. It emphasises the need for the qualities of the build environment to be commensurate with good practice in mental health care.

The principle recommendations are:

- The process for developing new units and the requirement should involve carers and users at all stages of the process.
- The facility should strive to be as domestic in size and style as possible, with access to suitable landscaped areas, minimising the institutional feel. They should be located on a main District General Hospital campus but as a separate building with its own entrance.
- Staffing arrangements - there should be adequate numbers and skill levels of staff, which reflect the needs of the client group in terms of the severity of their illness.
- Operational matters particularly safety & privacy - the facility should be designed to deal with a wide range of conditions and severity of illness whilst ensuring the safety and privacy of individuals in terms of the physical layout, staff training and operational policies.

2.4.4 Sainsbury Centre for Mental Health

The Sainsbury Centre for Mental Health conducted a research project looking at the quality of acute psychiatric wards and what users require from the service²⁷. The study covering 215 service users, sought patients' views, at the time of their discharge, on the care they received and the quality of the environment. The main findings were:

- In-patient care is very unpopular.
- Wards lacked many basic amenities. 55% of patients had no separate bedroom, 71% no secure locker for personal possessions and 47% no quiet area.
- Many patients felt unsafe.
- Women were particularly dissatisfied - they were very concerned about privacy and cleanliness, and also about personal safety.
- Conditions are especially poor in deprived areas.

2.4.5 Health Advisory Service Standards

The Health Advisory Service 2000, Standards for Adult Mental Health Services²⁸ sets out a number of standards for the design and layout of acute in-patient mental health facilities. These include;

- Each sex should be accommodated in separate, completely self-contained sleeping, bathing, washing and toilet areas.
- A range of social, recreational and occupational therapies and activities should be available.
- Living conditions should be pleasant, comfortable and acceptable to the users.

2.5 Overview of Local Mental Health Strategies

The Primary Care Trusts (PCTs) and local authorities within the Peterborough locality of the Trust's catchment area are formed into two local mental health groups, Peterborough and Fenland. These groups have developed the strategic development plans for local Mental Health Services in line with the national agenda, and highlighted the high priority objectives which have been the key areas of service development and investment for Mental Health services over the past three years.

The areas for the continuing development of services are defined in the Local Delivery Plan²⁹ 2003-2006 to be published in March 2003. These will incorporate the issues still to be addressed as previously outlined in the local JIP's and Health Improvement Programmes (HimPs).

This project has formed a significant part of local strategies and development plans for several years. Its importance has been increasing as the further development of community mental health services is beginning to be constrained by the poor support provided by the In-patient Service.

The Trust has also worked with the Peterborough Hospitals NHS Trust on a joint estate strategy to ensure the effective use of the local health estate. A brief resume of this work is also included.

2.5.1 Development of Mental Health Services in the Peterborough Locality

The Local Implementation Plan, produced in response to the NSF for Adult Mental Health Services, set out a comprehensive service development programme for Adult Mental Health Services in Cambridgeshire. The Plan was jointly produced by the Primary Care Trusts, Peterborough Social Services, Cambridgeshire Social Services, NHS Trusts, the independent sector, user and carer groups and District Councils and contained a detailed study of existing Adult Mental Health Services in the county, demographic data, needs assessment and service development priorities. The service gaps and pressures identified in the Plan for the Peterborough locality included:

- A need for a 24 hour staffed accommodation unit in Peterborough.
- Lack of access to psychiatric intensive care beds and low secure beds across the county.
- A need for comprehensive outreach services.
- A lack of access to day and work services, and supported accommodation in the rural areas.
- Pressure on acute admissions wards.
- Caseload pressures on community and Out-patient Services.
- Inadequate in-patient environment in Peterborough and Fenland and the need to redevelop this inadequate in-patient provision.
- The need to 're-engineer' services as part of resettling continuing care patients into the community and to further develop community based services.

This framework has provided considerable impetus to the development of Mental Health services in the locality, where significant new investment has been made to address the service gaps and modernise the local services in line with the national agenda. This development has been supported by service users and carers where there has been some innovative work undertaken to ensure full engagement and involvement in the development process. Service users and carers are involved in the planning forums to develop strategic plans for mental health services and the Trust has also piloted a Service User Employment Project which has resulted in the appointment of service users to Healthcare Assistant posts within the Adult Mental Health Service. This has brought a user focus to the sharp end of service

delivery and added a service user perspective to the staff development programme. It also sets an example to other organisations in providing employment opportunities for people with mental health problems. The Trust has also worked with Social Services on the development of a service user co-ordinator post which is aimed at achieving continuing and meaningful user involvement in service planning and development.

Within the Peterborough and Fenland areas of the Trust the following service developments have been implemented in the past 3 years:

- Investment in developing the staffing structure to support an effective High Dependency Unit;
- A £ 250,000 investment from Primary Care Trusts, and a re-alignment of resources within the Trust to establish an Assertive Outreach Service in the Peterborough locality;
- A £ 60,000 investment in establishing an Assertive Outreach Service in the Fenland locality;
- A £ 140,000 investment in the development of the Beacon Award winning Mental Health Assessment Team who provide mental health assessments in the A&E department and urgent assessments for the primary care team;
- The development of a 24 hour supported accommodation scheme in the Peterborough locality in partnership with the local authority and a local housing association;
- A £ 250,000 development of a flexible and integrated day services centre in the Peterborough locality;
- Development of Memory Clinics within the Older Peoples Mental Health services in line with Nice guidance on the treatment of Alzheimer's disease;
- Environmental and safety improvements to In-patient services in Peterborough and Fenland;
- Accessibility to treatment for ethnic minority groups through the development of an ethnic minority liaison post to facilitate, in conjunction with mainstream mental health services, access to these services;

This targeted investment in developing the community infrastructure to support a robust and comprehensive mental health service has exposed the deficiencies in the supporting inpatients services for mental health patients in the Peterborough locality.

This OBC sets out to address these deficiencies and utilising the latest guidance on service standards and design practice, a number of strategic objectives underpinning the project have been identified:

- To provide services which are clinically safe and allow for the provision of individualised and therapeutic care;
- Provide services that meet the national and local priorities as set out in the NSF and Local Delivery Plans;
- Provide In-patient services that are fully integrated with community, mental health and social services;
- To ensure full compliance with the requirements for gender separation within in-patient facilities, to ensure their dignity, privacy and safety is maintained.

2.5.2 Strategic Direction for Mental Health Services in the Peterborough Locality - Local Delivery Plans

The Local Delivery Plans being developed for 2003-2006, set out the service development priorities for Mental Health Services in Cambridgeshire, including the need to make environmental and safety improvements to the In-patient facilities in Peterborough.

These build on the Local Implementation Plans for the National Service Frameworks, the Health Improvement Plans, and the Joint Investment Plans for Older People and Learning Disabilities services.

For Adult Mental Health Services the proposed developments build on the community developments which have already taken place and are aimed at supporting users of the service to continue to live a normal life within the community, with the appropriate support available and easily accessible. The key

issues for the future development of Adult Mental Health Services in the Peterborough locality as outlined within the Local Delivery Plan 2003-06 include:

- The establishment of a Chair in Community Psychiatry in conjunction with Cambridge University;
- Establishment of the Primary Health Care Worker role to assist in the development of seamless services between primary and secondary care;
- Development of a crisis resolution team and home treatment service in the locality;
- Availability of an increased range of psychological therapies and treatments within the community services.
- Development of Carer Support Worker posts to offer a broader and more accessible range of respite support and advice to carers.
- Establishment of an Early Intervention Service aimed at those aged between 14-35 to provide early diagnosis and treatment.
- The re-provision of Mental Health In-patient Services on a single site.
- Development of a community focussed eating disorder service to avoid out of county referrals for this client group and provide an accessible, local service.

For Older Peoples Mental Health Services the focus is on the need to provide services that *'enable older people to live safely and independently in their own homes with the optimum level of health and with the right support'*. The Local Delivery Plan identifies specific developments for older people with a mental illness. These include:

- Establishment of an Early Intervention and Treatment Team for Older People with mental health problems.
- Development of an Intermediate Rehabilitation Team within the Older Peoples Mental Health Services;
- Development of an Outreach Service for Older People with mental health problems.
- Development of an Older Peoples Mental Health Community Team in the Whittlesey area.
- Development of an Integrated Day Care service for Older People with mental health problems.
- The re-provision of Mental Health In-patient Services on a single site.
- The implementation of joint assessment tools and shared information technology systems.

The future shape of Older Peoples services required locally to meet the needs of the Older Peoples NSF is still under some debate. The Local Delivery Plans will be developed to take account of the service models which result from this reshaping. The initial view of the risks to this OBC from the Older Peoples NSF is that the majority of service redesign will be around community structures and the impact on the bed base will be minimal.

The strategic direction for services for people with learning disabilities in the locality is the responsibility of the Peterborough Learning Disability Partnership and the Cambridgeshire Learning Disability Partnership. The development plans are at an early stage but all the local stakeholders have signed up to a set of guiding principles:

- People with learning disabilities have diverse and changing needs and may require services from many different agencies throughout their lives
- Services should be built around the needs of users instead of users having to accept the services that are currently available.
- To end the distinction between health and social needs
- Involvement of other agencies in partnership, including education and housing.

- The publication of the White Paper 'Valuing People' has not enabled the full service strategy to be finalised for inclusion in the OBC. It has, however, been agreed to ensure that this is done at FBC. The initial view of the Inter-Agency Planning Group responsible for implementing the White Paper is that the size of the requirements outlined in this OBC are robust. There is further work to be done on where best these beds will be used, but there will be no impact on the numbers required.

The key Learning Disability developments outlined in the Local Delivery Plan 2003-2006 are aimed at:

- Replacing the institutional care settings with residential accommodation with tenancy agreements for all but those with the most challenging behaviours, thus facilitating supported living for this client group.
- Removing the barriers between health and social care including the further development of joint commissioning and use of the NHS Act Partnership Powers.
- Developing integrated community teams to deliver rapid support to prevent and respond to crises.
- Supporting carers and their families through the development of respite services.
- Development of Integrated Day Services in the community.
- Improve the inpatient experience for adults with Learning Disabilities in NHS units.

The specific issues that have prompted the inclusion of the Learning Disabilities Assessment and Treatment Unit in this project stem from the problem of the Trust's beds being used for both acute and Home Office referrals. The number of Home Office referrals is such that the majority of the beds are unavailable to the acute service. There are also a number of inadequacies in the current facilities that affect the quality of care.

In addition, if these facilities were omitted from this OBC, then they would be the only mental health in-patient facility located on a remote site. This would result in the perpetuation of some of the clinical risks this OBC is designed to overcome. The Trust and Health Service Commissioners have agreed to move the acute learning disability in-patient facility from the current location to the ECH site. This will better protect the service's availability, ensure patients are accommodated in an appropriate setting and allow planning for the provision of Home Office referrals without encroaching on other admission services.

2.5.3 Collaborative Working with Peterborough Hospitals NHS Trust

The Peterborough Hospitals NHS Trust is pursuing a major strategic development under the Greater Peterborough Health Investment Plan to rationalise the provision of acute services on a single site in the city, supported by an Integrated Care Centre offering a range of sub-acute services. This development is at Outline Business Case stage with an estimated capital development cost of £270 million. In developing both Outline Business Cases the Trusts have worked together in ensuring the estate strategies are complementary including joint working on:

- Undertaking an assessment of the whole health estate in the Peterborough locality,
- Identifying how the estate can best be utilised to support the strategic plans of both Trusts, and
- Identifying which parts of the estate are surplus to requirements.

The outcome of this work has been incorporated into this OBC and used as the basis of the development control plan for the preferred option in each case, the Edith Cavell Hospital site. See Chapter 6, for more details.

2.5.4 Summary of the Local Mental Health Strategy

At the centre of the health strategy for Mental Health Services is the development of a robust, integrated whole healthcare support system. This involves the dual task of rationalising and improving the quality of acute care, while developing community and social services. Within these two tasks there are a number of common themes:

- The improvement of the nation's health and the reduction of inequality.
- Putting the patients' needs at the centre of the service.
- Ensuring faster and more equitable access.
- The integration of NHS and Social Services through partnership working. e.g. creation of the Cambridgeshire and Peterborough Mental Health Partnership NHS Trust, and creation of the Cambridgeshire Learning Disability Partnership and Peterborough Learning Disability Partnership as 'lead commissioners' for Learning Disability health services.
- Basing services on best practice and ensuring they are clinically safe, effective and efficient.
- Ensuring services are responsive and flexible to changes in demand.

The improvements to the In-patient facilities were encompassed within the SOC which preceded this OBC. It identified five key objectives for Mental Health Services which remain relevant:

- The provision of clinically effective and safe services for the catchment population.
- The delivery of individualised, comprehensive and continuous care.
- The development of local services to minimise the impact of mental illness on patients.
- The development of a local network of community based and focused services.
- The development of a local network of services on a 'hub and spoke' principle achieving a balance between patient dependency and community links.

A sub-set of objectives for hospital-based services was also identified that form the objectives of the project:

- The provision of facilities designed for psychiatric in-patient care and 'fit for purpose',
- The development of hospital services which support the community services.
- The creation of a patient centred, optimally therapeutic environment in which patients of similar needs and affinity can be managed together.
- The provision of a facility that provides a relaxed and secure environment.
- The elimination of the existing fragmentation and duplication of services.

2.6 Trust Resources

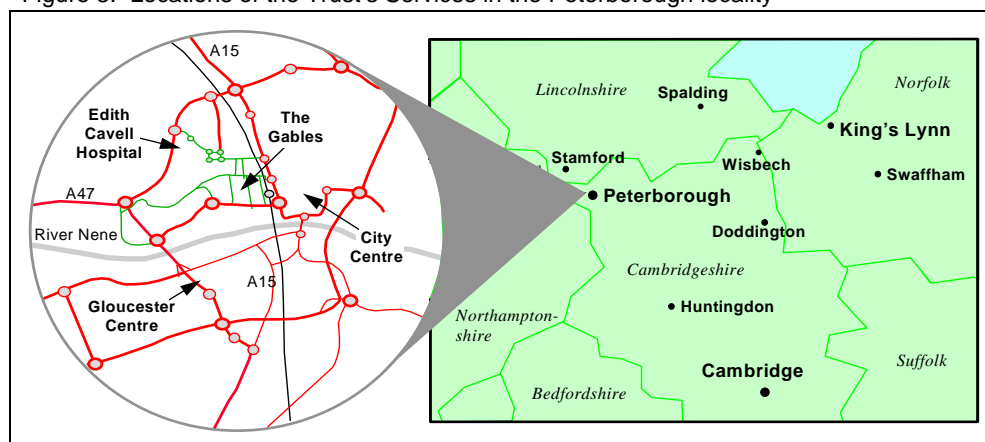
2.6.1 The Trust's Estate

The Trust occupies a wide range of properties, of varying type and condition throughout its catchment area. The services covered by this OBC are all located in properties within the City of Peterborough. These are:

- Edith Cavell Hospital Site
 - Wards 1 and 5
 - Adult Out-patients Department
 - Older People's Out-patient Department
- The Gables, including the HDU and the Pines.
- The Gloucester Centre Site

- Dove House
- The Larches

Figure 3: Locations of the Trust's Services in the Peterborough locality



2.6.1.1 Estate Performance

The locations listed have been performance assessed against the following categories and ratings.

Estate Condition

- Rating A - as new.
- Rating B - sound and operationally safe but exhibits minor deterioration.
- Rating C - operational, but major repairs or replacement needed.
- Rating D - runs a severe risk of full breakdown.

Functional Suitability

- Rating A - high degree of satisfaction.
- Rating B - acceptable/reasonable standard. No major changes needed.
- Rating C - below an acceptable standard.
- Rating D - unacceptable in its present condition.

Space Utilisation

- Rating A - adequate.
- Rating B - under-used.
- Rating C - overcrowded.
- Rating D - empty.

Statutory Compliance

- Rating A - as new.
- Rating B - buildings that comply with Firecode & Safety requirements.
- Rating C - buildings that falls below category A and B.
- Rating D - building that falls dangerously below category A and B.